

Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Missouri Ethics Commission

Statement of Committee Organization

1		01528	
4	Type: New Amended (if amending, enter MEC ID	& section changed)
2	Committee Information (H72010C Ac Live Matheir)		
	Name of Committee On Ridge Marylyton	1 NO 12383 to 259	-772
	Committee Mailing Address, City, State, & Zip	Telephone Number	
70	Committee Tune December Condidate Constitution	County Clerk or Board of Election Commissioners ng (PAC) Debt Service Exploratory Politic	al Darty
بر 3.	Committee Type: Campaign Candidate Continuing Treasurer/Deputy Treasurer Information	ng (PAC) Debt Service Exploratory Politic	al Party
J.	Lisa Maltrio		
	19948 Oak Ridge Warretm	Treasurer's Email Address (optional) MO (U3V) 354-7725 (186) 35	77 - 847
	Treasurer's Mailing Address, City, State, & Zio	Treasurer's Home Telephone Number Treasurer's Work Telepho	ne Number
	Deputy Treasurer's Name (if one appointed) 7 Million Trave (+ St. Park & MO)	Deputy Treasurer's Email Address (optional)	
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Tel	ephone Number
4.	Additional Committee Information	Mosellanham	
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Address, City, State, & Zip	
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, City, State, & Zip	
5.	CANDIDATES: Do you have more than one candidate committee official Bank Account Information (required by all committee)	ee? Yes (refer to instructions on back) No	
6.	Candidate Supported or Opposed (candidate committees mu		
Ū.	Lisa Nattino 19948 Cak Ridge Namestm	(636) 35A-7715 ()	
	Name & Mailing Address, Gity, State & Zip of Candidate N.W. 8 - 1 Le Public Administration	Teléphone Number (Candidate Committees Only) Suppor	H
7 1	Election Date Office Sought & Political Subdivision Warren	Political Party Support or Opplate	
/.	Ballot Measure Supported or Opposed (campaign conjmittee	s must complete this section) N. 8, 2016 Support	_
_	Name of Ballot Measure	Election Date & Political Subdivision Support or Oppose	Garranii Germanii dea ii
8.	Signature(s) Check certification(s) & sign (required by all co		ate. I
1	further acknowledge that I am aware that any false statement		
ā	Committee Treesurgh And Dull Wally	Candidate (Condidate Committees Only)	
	Form must be completed in full & contain of the contain to the contain the contain to the contain the contain to the contain t	original signature(s), fax filings are not accepted.	Page 1 of 3